8-	l	8	-06
----	---	---	-----

REQUEST FOR
CONTINUED EXAMINATION (RCE) TRANSMITTAD (PCE)
TRANSMITTAD

Mail Stop RCE **Commissioner For Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

/	_		4	6
4	UG 1	7	5008	(م
E.				
	FIRA	BE	MARK	

Application Number:	10/797,400
Filing Date:	March 10, 2004
First Named Inventor:	Errette Bevins
Group Art Unit:	1733
Examiner Name:	Samchuan Cua Yao
Attorney Docket No.	PGI6044P1711US

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1.	amend unless	ments aı applican	nd amer it instruc entered,	under 37 C.F.R. §1.114 Note: If the RCE is proper, any previously-filed unentered adments enclosed with the RCE will be entered in the order in which they were filed its otherwise. If applicant does not wish to have any previously filed unentered applicant must request non-entry of such amendment(s). usly submitted. If a final Office Action is outstanding, any amendments filed after the				
	a.	=	final Office Action may be considered as a submission even if this box is not checked.					
		i.		Consider the arguments in the Appeal Brief or Reply Brief previously filed on				
		ii.	□	Other:				
	b.	፟	Enclos					
		i.	՛⊠	Amendment/Reply				
		ii.		Affidavit(s)/Declaration(s)				
		iii.		Information Disclosure Statement				
		iv.	ۃ	Petition for Extension of Time				
		٧.		Other:				
2.	Miscell	aneous		pension of action on the above-identified application is requested under 37 CFR (3(c) for a period of:				
	a.	旦	1.17(i)	months. (Period of suspension shall not exceed 3 months. Fee under 37 CFR required)				
	b.		Other_					

3. The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. The filing fee has been calculated as shown below:

Small	Entity
-------	--------

Large Entity

For	Claims After Amendment	Highest Number Previously Paid For	Extra Claims	Rate	Fee		Rate	Fee
Basic Fee					\$395.00	OR		\$790.00
Total Claims	11	20		x \$25.00	\$	OR	× \$50.00	\$
Independent Claims	2	3		x \$100.00	. \$	OR	x \$200.00	\$
Multiple Dependent Claims				x \$180.00	\$	OR	x \$360.00	\$
				TOTAL	\$	OR	TOTAL	\$790.00

98/21/2006 YPOLITE1 90000026 10/9/400

Ø1 FC:1891

790.00 OP

	a.	<u>⊠</u> i. iii.	The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, to Deposit Account No. 23-0785. I have enclosed a duplicate copy of this sheet. ☐ RCE filing fee ☐ Other				
	b.	՛	A check in the amount of \$790.00 to cover the fees is enclosed.				
4.	Correspondence Address: WOOD, PHILLIPS, KATZ, CLARK & MORTIMER Citigroup Center, Suite 3800 500 West Madison Street Chicago, Illinois 60661 Telephone: (312) 876-1800 Facsimile: (312) 876-2020						
			Customer Number: 32116				
Date:	Augus	st 17, 20	Attorney's Signature Stephen D. Geimer, Reg. No. 28,846				
	-		CERTIFICATE OF MAILING BY EXPRESS MAIL				
enclos Office	sed here to Addr	in, are b essee" s	s Request For Continued Examination Transmittal and any other documents referred to as eing deposited in an envelope with the United States Postal Service "Express Mail Post ervice under 37 CFR 1.10 on the date indicated below and addressed to: Mail Stop RCE, ents, P.O. Box 1450, Alexandria, Virginia 22313-1450.				
Expre	ss Mail l	_abel No	.: EV 843641105 US				
Date o	of Depos	sit:	August 17, 2006				
Typed	/Printed	Name o	f Person Signing: Colleen Davison				
Signat	ture:		Colleen Davison				